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							PTO/S	AT 6847 (07-07)
Under the Paperwork Reducti				U.S. Patent		red for use through ark Office; U.S. DEI	06/30/2010. OM	B 0651-0032
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Effective on 12/08/2004.				A P . P . 54		plete if Know		
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).						09/944,341-Conf. #9771		
FEE TRANSMITTAL						September 4, 2001 Tsuneo SATO		
For FY 2007				Examiner Name		Aaron M. Richer		
Applicant claims small entity status. See 37 CFR 1.27				Art Unit		2628		
TOTAL AMOUNT OF PAYMEN	_ '	(\$) 620.00		Attorney Docket No.		0649-0799P		
				Attorney Docket	NO.			
METHOD OF PAYMENT	(check all th	ıat apply)						
Check Credit Ca	rd M	Ioney Order	Non	ne Other (please identify	y):		
X Deposit Account Deposi	it Account Numbe	ar: 02-1	 2448	Deposit A	Account Name	Birch, Stewa	ırt, Kolasch 8	Birch,
For the above-identif				•				
x Charge fee(s) i	•					icated below, ex	xcept for the	filina fee
Charge any add		•	ments of	. \vdash	. ,			
fee(s) under 37				x Credit	any overpa	lyments		
FEE CALCULATION								
1. BASIC FILING, SEARCH,								ľ
		S FEES Small Entity	SEA	ARCH FEES Small Entity	EXAMIN	IATION FEES Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)		Fee (\$)	Fee (\$)	Fees Pai	d (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES Fee Description								nall Entity Fee (\$)
Each claim over 20 (including	ıg Reissues)			•			50	25
Each independent claim over 3 (including Reissues)							200	100
Multiple dependent claims							360	180
Total Claims Extra C	laims Fo	ee (\$)	Fee P	Paid (\$)	<u>M</u> ı	ıltiple Depende	nt Claims	
UD a bishoot sumboo of total slain	X	=			<u>Fe</u>	<u>e (\$)</u> !	Fee Paid (\$)	
HP = highest number of total claim Indep. Claims Extra C	•		Eoo E	haid (\$)				
indep. Claims Extra C	X X	ee (\$) =	reer	Paid (\$)				
HP = highest number of independe	ant claims paid	for, if greater than	n 3.					
3. APPLICATION SIZE FEE								:
If the specification and draw								
listings under 37 CFR 1, sheets or fraction thereo					or small en	itity) for each ac	dditional 50	
·	tra Sheets			dditional 50 or frac	tion thereof	Fee (\$)	<u>Fee Pai</u>	id (\$)
				(round up to a who			=	
4. OTHER FEE(S)							Fees Pa	id (\$)
Non-English Specification								
Other (e.g., late filing sur		01 Notice of a 51 Extension		ponse within fir	st month		500.6 120.6	1
	12	- LAGISION					120.1	
SUBMITTED BY	71611	and		Registration No.		1	/700\ 00= 1	
Signature	<i>}//\</i>	(Attomey/Agent) 29,000 Telephone ((703) 205-8000	
ame (Print/Type) Michael K. Mutter 46463						Date	July 16, 20)07

MKM/WDT/jen